

# United States District Court

FOR THE

DISTRICT OF

MASSACHUSETTS

Boston Division

Henry Satrowsky

SUMMONS IN A CIVIL CASE

V.

CASE NUMBER: U.S. DISTRICT COURT  
DISTRICT OF MASS.

Boston & Maine Railway Company

- and -

Springfield Terminal Railway Company

04 10827 JLT

TO: (Name and address of defendant)

Springfield Terminal Railway Company  
Iron Horse Park  
North Billerica, MA 01862

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

THOMAS J. JOYCE, III  
HANNON & JOYCE

The Public Ledger Building - Ste. 1000  
150 S. Independence Mall West  
Philadelphia, PA 19106-3323  
(215) 446-4460  
Attorney for Plaintiff

MICHAEL J. MCDEVITT  
LAWSON & WEITZEN LLP  
88 Black Falcon Avenue  
Suite 345  
Boston, MA 02210  
(617) 439-4990  
Local Counsel for Plaintiff

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

TONY ANASTAS

CLERK



(BY) DEPUTY CLERK

*[Signature]*

APR 27 2004

DATE

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

**Springfield Terminal Railway Co.**  
**Iron Horse Park**  
**North Billerica, MA 01862**

**ATTN: Cynthia Scarano**  
**Director of Claims**

## 2. Article Number

(Transfer from service label)

7003 0500 0005 4929 5708

PS Form 3811, August 2001

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Cory Chamberlain*☐ Agent☐ Addressee

## B. Received by (Printed Name)

*Cory Chamberlain*

## C. Date of Delivery

*5/3/04*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail ☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

102595-02-M-1540